# The Effects of Domestic Violence on Children

# **Objectives:**

- 1. Participants will learn how children are affected when domestic violence occurs in their home.
- 2. Participants will better understand how witnessing violence affects the brain development of children.
- 3. Participants will learn the current statistics of children living in violent homes.

### **Activities:**

- 1. What is the current policy for law enforcement and victim advocates who are contacted in a domestic violence incident involving children?
- 2. What resources are available for children and what is needed in your community?
- 3. Break into groups of 4-6. Appoint a team leader to keep everyone on task and a reporter to take notes and report back to the large group.
  - a. Develop a flow chart of what "ideally" should occur once domestic violence involving children has been reported in your community.
  - b. The flow chart may vary depending on the resources within your community.
  - c. Discuss why some cases don't fit within the "ideal" and what can we do to assure they get the services they need.

### **Discussion Questions:**

- 1. Does your community have a mandatory reporting policy/code/law for reporting incidents of domestic violence? Does this apply to hospitals and health care providers? How can you and your Child Protection Team enable this policy/law/code to work better and better help children?
- 2. Discuss the effects of violence on children and what the Child Protection Team can do to assist families experiencing violence in their home.
- 3. Discuss the prevalence of domestic violence in your community and what the community can do to decrease the incidents of domestic violence. Would that take additional tribal laws? Mandatory reporting for all agencies? Mandatory arrest policy for batterers? Tribal Council involvement in stopping domestic violence?

Training Modules (Power Point Presentation): The Effects of Domestic Violence on Children

### The Effects of Domestic Violence on Children

Living in a home where domestic violence occurs affects children. Many children believe they are responsible or are partly to blame. Children who had stayed in a refuge with their mother to escape domestic violence were interviewed. Some comments shared were:

- That violence in families is far worse than violence between strangers, because it happens between people who are supposed to love each other.
- That they lived in a constant state of fear, with feelings experienced including terror, humiliation, anxiety, shame, anger, loneliness and powerlessness.
- That their experience varied even within families:
  - Some siblings were abused, others were not.
  - o Some children tried to intervene, others hid.
  - Some children covered up the violence, others said nothing.

One third of the children who witness the battering of their mothers demonstrate significant behavioral and/or emotional problems, which may include stuttering, anxiety and fears, sleep disruption, excessive crying, school problems, and psychosomatic disorders. Battering affects even the fetus. Battered women have increased risk of spontaneous abortions, pre-term labor, fetal injuries, and low birth weight babies.

Studies have shown that children do not have to be hit in order to suffer the effects of violence. Witnessing violence in the home will also have detrimental effects. Parents may think that the children are not witnesses if the violence occurs after the children have gone to bed or are playing in another part of the home. In reality, however, children hear and see much more than their parents know and in good probability are not sleeping through the violence. And children who see or hear violence live in fear.

What happens to a child who grows up in tension and fear? The child's brain may develop differently from the brain of a child raised without fear. The part of the brain that controls learning, logic, empathy, sympathy, remorse – all the finer thinking processes – does not develop as it should because a fearful child is developing a brain that reacts to fear. The child goes into a "fight or flight" mode of thinking, with the brain cueing the body to elevate heart rate, respiration, and blood pressure.

Children whose brains have developed to respond to fear do not act appropriately when they are placed in situations where there should be no need to respond to fear. For instance, when a fearful child starts school, he or she may act out, always looking out for danger, responding aggressively to schoolmates, withdrawing from others, and/or disrupting the classroom. These children have difficulty learning because they can't pay attention. The cortex, the part of the brain used in learning, is "on hold," because the brain is busy responding to danger that doesn't exist in the school setting. The symptoms displayed by children who witness violence are the same symptoms as soon in children who have been diagnosed with Attention Deficit Disorder (ADD) or Attention Deficit Hyperactivity Disorder (ADHD).

The child's brain stops developing at the age of 12, and there are certain "windows of opportunity" during those 12 years of development that open and then close. It is imperative that any violence in the home ends, preferably before the child is born.

Although the issues of domestic violence and child abuse are often separated, a growing body of research suggests that child abuse and domestic violence are linked within families.

Some effects on children include:

- Death by homicide
- Death by suicide
- Emotional injuries, such as low self esteem
- Depression
- Aggressive behavior toward others/delinquency
- Poor school adjustment (educational and peer adjustment)
- Modeling behavior; learned victim/aggressor roles
- Runaway episodes
- Alcohol/drug experimentation
- Early marriage
- Continuation of violent behavior in their adult relationships
- Expansion of violence in the community

Thus the home becomes a "training ground" for violent interaction patterns. Research has shown that both victims and witnesses of violent acts against family members may identify with the aggressor. They observe that aggressors in a "love" relationship achieve their goals by using violence which may result in the observer's modeling the aggressive behavior themselves.

These patterns are then passed from generation to generation. Thus, spousal assaults represent serious long range problems for the community and the family, problems which extend far beyond the cessation of the immediate violence.

Identification of the victim with the aggressor is more powerful when the aggressor is a role model, as in the case of parents or siblings. Parental aggressive behavior and violence are confusing to the child who receives nurturance, food and warmth from the same person. Children also learn other patterns of poor coping, insecurity, and ineffectual methods of interpersonal interactions.

D. Owens and M.A. Strauss. "The social structure of violence in childhood and approval of violence as an adult." Aggressive Behavior, V.I, pp. 193-211, 1975.

### **Domestic Violence and Children**

- In a national survey of over 6,000 American families, 50% of the men who frequently assaulted their wives also frequently abused their children. (1)
- Child abuse is 15 times more likely to occur in families where domestic violence is present. (2)
- Men who have witnessed their parents' domestic violence are three times more likely to abuse their own wives than children of non-violent parents, with the sons of the most violent parents being 1000 times more likely to become wife beaters.
- Children who witness violence at home display emotional and behavioral disturbances as diverse as withdrawal, low self-esteem, nightmares, self-blame and aggression against peers, family members and property. (4)
- A comparison of delinquent and nondelinquent youth found that a history of family violence or abuse is the most significant difference between the two groups. (5)
- Over 3 million children are at risk of exposure to parental violence each year. (6)

- 1. Straus, M.A. & Gelles, R.J. (eds.). Physical violence in American families. New Brunswick, NJ, Transaction Publishers, 1990.
- 2. Stacy, W. and Shupe, A. The Family Secret. Boston, MA. Beacon Press, 1983.
- 3. Straus, M.A., Gelles, R. J., & Steinmetz, S. Behind Closed Doors. Doubleday, Anchor. 1980.
- 4. Peled, Inat, Jaffe, Peter G. & Edelson, Jeffrey L. (eds) Ending the Cycle of Violence: Community Responses to Children of Battered Women. Thousand Oaks, CA: Sage Publications, 1995.
- 5. Miller, G. "Violence by and against America's children," Journal of Juvenile Justice Digest, XVII(12) p. 6. 1989.
- 6. Carlson, B.E., "Children's Observations of Interparental Violence" in Edwards, A.R. (ed.). Battered Women and Their Families. New York: Springer. Pp. 147-167. 1984.

## Implications of Children Raised in Violent Homes

Children raised in violent homes often imitate the behavior they witness as adults (85% of batterers witnessed violence as children; 50% of victims were raised in violent homes).

The statistics are staggering:

- Of all boys aged 11-20 who were arrested for murder, 63% have killed the man who was assaulting their mother.
- Children raised in violent homes are:
  - 6 times as likely to commit suicide
  - o 26 times as likely to commit sexual assault
  - 57 times as likely to abuse drugs
  - o 74 times as likely to commit other crimes against other persons

Below are some possible "Red Flag" behaviors that a child is the victim of witnessing violence in the home:

- Aggressive: attacking others, destroying property, cruelty to animals, verbal attacks
- Passive/withdrawn: avoids conflict, internalizes feelings, becomes the perfect child
- Manipulative: extreme jealousy, sulking, "getting sick"
- Rebellious/acts out: challenges authority, smokes/drinks/drugs, skips school, runs away, steals
- Psychological cues: suicidal ideations/behaviors, depression, self mutilation, phobias, eating disorders, nightmares
- Health problems: headaches, stomach aches, irritable bowels, bedwetting, backaches, skin rashes, mouth ulcers/cold sores, earaches

### How to Help

If a child tells you he or she is living in a violent situation, you can:

- Let the child know you believe them and understand. Reassure the child that it is not their fault.
- Let the child talk about anything that may be worrying them. Children are not usually encouraged to talk about violence at home. No one is supposed to talk about it outside the family.
- Help the child learn other ways of dealing with anger/frustration.
- Help the child work out a safety plan for an emergency.
- Help the child to feel good about him/herself.
- Reassure the child that you will help as much as you can, or you will talk with someone who can and they are not alone.

### Mothers Taking Action – Talking with your Children

 Take a strong position that your partner's violent behavior is wrong and damaging to you and to them.

- Make sure the children know that they are not responsible or to blame for his violent behavior and neither are you.
- Explain your actions in direct relation to his wrong behavior. You would not be taking the actions (leaving, divorce, etc.) if his behavior had been acceptable.
- Condemn the violent partner's behavior, not him personally. The children probably love and feel loyalty to him.
- Allow the children to express whatever feelings they may have for him.
- Reassure the children that you love them.
- Encourage your children to express all their feelings and fears.
- Be open with them about the stresses of their past and current life. Don't ignore or avoid talking about how it affects them.
- Be positive about the future whenever possible.

It is important for children to understand that your partner's physical violence, verbal abusiveness and any other destructive behavior is wrong. This can help reduce any damage to their self worth, and their ideas about how family members can respect and relate to each other.

# **Implications for Teachers**

Child protection implications must be kept in mind. Teachers are in an ideal position to assist children affected by abuse in the home by picking up signs and responding sympathetically to such children. At school, children may be affected in the following ways:

- They may be too tired to concentrate on their lessons.
- They may be depressed and withdrawn and friendships may suffer.
- They may display behavior problems in relation to anger and aggression.
- They may suffer frequent interruption to their schooling when they are forced to leave a violent home.

#### THE EFFECTS OF DOMESTIC VIOLENCE ON CHILDREN

Child abuse and domestic violence are linked in a number of important ways that have serious consequences for the safety of children. But with effective intervention and a coordinated response to child abuse and domestic violence, battered women advocates, child protective workers, and judges and community members can help keep families safer.

- Children can be injured as a direct result of domestic violence. Batterers sometimes intentionally injure children in an effort to intimidate and control their adult partners. These assaults can include physical, emotional, and sexual abuse of the children. Children are also injured either intentionally or accidentally during attacks on their mothers. Assaults on younger children may occur while the mother is holding the child. Injuries to older children often occur when an adolescent attempts to intervene in violent episodes.
- There is a correlation between domestic violence and child abuse. In a national survey of more than 6,000 American families, 50 percent of the men who frequently assaulted their wives also frequently abused their children.

- Children can be adversely affected by witnessing domestic violence. Although
  many parents believe that they can hide domestic violence from their children,
  children living in these homes report differently. Research suggests that
  between 80 and 90 percent of these children are aware of the violence. Even if
  they do not see a beating, they hear the screams and see the bruises, broken
  bones, and abrasions sustained by their mothers.
- Infants exposed to violence may not develop the attachments to their caretakers that are critical to their development; in extreme cases they may suffer from "failure to thrive." Preschool children in violent homes may regress developmentally and suffer sleep disturbances, including nightmares. Schoolage children who witness violence may exhibit a range of problem behaviors including depression, anxiety, and violence towards peers. Adolescents who have grown up in violent homes are at risk for recreating the abusive relationship they have seen.
- While many children experience difficulties resulting from their exposure to violence, many children appear to cope with the experiences and show no fewer problems than comparison children. This is likely because the level of violence in families and children's exposure to if vary greatly.
- A growing body of evidence supports the need for early intervention when children show criminal propensities. Research shows that early intervention efforts are proving effective in reducing criminal and delinquent behavior. The social factors that these early intervention efforts address are similar to those found to be associated with domestic violence and child abuse, and the contribution of family violence to later youth violence is well documented.

#### **FACTSHEET: Children and Domestic Violence**

#### Domestic Violence and Children

- The U.S. Advisory Board on Child Abuse suggests that domestic violence may be the single major precursor to child abuse and neglect fatalities in this country.<sup>1</sup>
- Studies suggest that between 3.3 and 10 million children witness domestic violence annually.<sup>2</sup>
- In a national survey of more then 6,000 American families, 50 percent of the men who frequently assaulted their wives also frequently abused their children.<sup>3</sup>
- In 200 substantiated child abuse reports, the Massachusetts Department of Social Services found that in 48 percent of the case records, domestic violence was a barrier to case closing.<sup>4</sup>
- Children who witness domestic violence are more likely to exhibit behavioral and physical health problems including depression, anxiety, and violence towards peers.<sup>5</sup> They are also more likely to attempt suicide, abuse drugs and alcohol, run away from home, engage in teenage prostitution, and commit sexual assault crimes.<sup>6</sup>
- Slightly more than half of female victims of intimate violence live in households with children under age 12.<sup>7</sup>
- In a 1993 study, the Oregon Department of Human Resources reported that domestic violence was present in 41 percent of families experiencing critical injuries or deaths due to child abuse and neglect.<sup>8</sup>
- Men who as children witnessed their parents' domestic violence are twice as likely to abuse their own wives than sons of nonviolent parents.<sup>9</sup>

<sup>&</sup>lt;sup>1</sup> U.S. Advisory Board on Child Abuse and Neglect, U.S. Department of Health and Human Services, A Nations' Shame: Fatal Child Abuse and Neglect in the United States: Fifth Report, 1995.

<sup>&</sup>lt;sup>2</sup> Carlson, Bonnie E. (1984). Children's observations of interpersonal violence. Pp. 147-167 in A.R. Roberts (Ed.) Battered women and their families (pp. 147-167). NY: Springer, Straus, M.A. (1992). Children as witnesses to marital violence: A risk factor for lifelong problems among a nationally representative sample of American men and women. Report of the Twenty-Third Ross Roundtable. Columbus. OH: Ross Laboratories.

Columbus, OH: Ross Laboratories.

<sup>3</sup> Strauss, Murray A., Gelles Richard J., and Smith, Christine. 1990. Physical Violence in American Families; Risk Factors and Adaptations to Violence in 8,145 Families. New Brunswick: Transaction Publishers.

<sup>&</sup>lt;sup>4</sup> Hangen, E. 1994. Department of Social Services Interagency Domestic Violence Team Pilot Project: Program Data Evaluation. Boston: Massachusetts Department of Social Services.

<sup>&</sup>lt;sup>5</sup> Jaffe, P. and Sundermann, M., "Child Witness of Women Abuse: Research and Community Responses," in Stith, S. and Straus, M., Understanding Partner Violence: Prevalence, Causes, Consequences, and Solutions. Families in Focus Services, Vol. II. Minneapolis, MN: National Council on Family Relations, 1995.

<sup>&</sup>lt;sup>6</sup> Wolfe, D.A., Wekerle, C., Reitzel, D. and Gough, R., "Strategies to Address Violence in the Lives of High Risk Youth." In Peled, E., Jaffe, P.G. and Edleson, J.L. (eds.), ending the Cycle of Violence: Community Responses to Children of Battered Women. New York: Sage Publications. 1995.

U.S. Department of Justice, Violence by Intimates: Analysis of Data on Crimes by Current or Former Spouses, Boyfriends, and Girlfriends, March 1998.
 Oregon Children's Services Division. 1993. Task Force Report on Child Fatalities and Critical Injuries

Oregon Children's Services Division. 1993. Task Force Report on Child Fatalities and Critical Injuries Due to Abuse and Neglect. Salem, OR: Oregon Department of Human Resources.

One study of 2,245 children and teenagers found that recent exposure to violence in the home was a significant factor in predicting a child's violent behavior. 10

#### Domestic Violence and Youth

- Eight percent of high school girls said "yes" when asked if "a boyfriend or date has ever forced sex against your will."11
- Forty percent of teenage girls age 14 to 17 report knowing someone their age who has been hit or beaten by a boyfriend. 12
- During the 1996-1997 school year, there were an estimated 4,000 incidents of rape or other types of sexual assault in public schools across the country. 13

# Pregnancy and Domestic Violence

- Each year, at least six percent of all pregnant women, about 240,000 pregnant women, in this country are battered by the men in their lives. 14
- Complications of pregnancy, including low weight gain, anemia, infections, and first and second trimester bleeding are significantly higher for abused women<sup>15</sup>, <sup>16</sup>, as are maternal rates of depression, suicide attempts, tobacco, alcohol, and illicit drug use.17

<sup>&</sup>lt;sup>9</sup> Stauss, Murray A., Gelles Richard J., and Smith, Christine. 1990. Physical Violence in American Families; Risk Factors and Adaptations to Violence in 8,145 Families. New Brunswick; Transaction

<sup>&</sup>lt;sup>10</sup> Singer, M.I., Miller, D.B., Gus, S., Slovak, K & Frieson, T., The Mental Health Consequences of Children's Exposure to Violence. Cleveland, OH: Cuyahoga County Community Health Research Institute, Mandel School of Applied Social Sciences, Case Western Reserve University, 1998.

<sup>&</sup>lt;sup>11</sup> The Commonwealth Fund Survey of the Health of Adolescent Girls, November 1997.

<sup>&</sup>lt;sup>12</sup> Children Now/Kaiser Permanente poll, December 1995.

<sup>&</sup>lt;sup>13</sup> U.S. Department of Education, Violence and Discipline Problems in U.S. Public Schools: 1996-1997.

<sup>&</sup>lt;sup>14</sup> Centers for Disease Control and Prevention, The Atlanta Journal and Constitution, 1994.

<sup>&</sup>lt;sup>15</sup> Parker, B., McFarlane, J., & Soeken, K. (1994). Abuse During Pregnancy: Effects on Maternal Complications and Infant Birthweight. Nursing Research 45, 32-37.

16 McFarlane, J. Parker B., & Soeken, K. (1996). Abuse During Pregnancy: Association with Maternal

Health and Infant Birthweight. Nursing Research 45, 32-37.

<sup>&</sup>lt;sup>17</sup> McFarlane, J., Parker, B., & Soeken, K. (1996). Physical Abuse, Smoking and Substance Abuse During Pregnancy: Prevalence, Interrelationships and Effects on Birthweight. Journal of Obstetrical Gynecological and Neonatal Nursing, 25, 313-320.